## Update on the Status of:

## GOVERNOR'S COUNCIL ON SUBSTANCE ABUSE 1996 RECOMMENDATIONS TO REDUCE SUBSTANCE ABUSE IN WASHINGTON STATE

Dr. James Keene, Council Chair Carol Owens, Staff Coordinator

November 1997



Building Foundations for the Future

Tim Douglas, Director

## GOVERNOR'S COUNCIL ON SUBSTANCE ABUSE

## SUBSTANCE ABUSE REDUCTION GOALS

## **PREVENTION**

- 1. Prevent and reduce the misuse and abuse of alcohol, tobacco, and other drugs.
- 2. Focus on outcome-based prevention strategies to increase the effectiveness of prevention efforts.
- 3. Increase community ownership and responsibility for prevention of misuse of alcohol, tobacco, and other drugs.

## **TREATMENT**

- 1. Increase access to and availability of chemical dependency treatment, as clinically necessary.
- 2. Reduce the negative effects of alcohol, tobacco, and other drugs.
- 3. Address the basic needs of people in chemical dependency treatment.

## **LAW AND JUSTICE**

- 1. Increase public safety.
- 2. Increase the effectiveness of law and justice efforts to reduce alcohol and other drug abuse-related crimes.
- 3. Foster citizen involvement and support for effective law and justice efforts, including community-oriented policing.

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Building Foundations for the Future

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# UPDATE OF THE GOVERNOR'S COUNCIL ON SUBSTANCE ABUSE 1996 RECOMMENDATIONS

In December of 1995, the Legislative Budget Committee released *Report 95-15: Drug and Alcohol Abuse Programs*. This report reviewed state-funded programs, and made several recommendations for future action. The LBC report was accepted by the Governor and the Director of the Office of Financial Management, although no formal action was taken by the Legislature. The Governor's Council has subsequently used the report's recommendations as a framework to guide its work.

The 1996 Governor's Council presented the first Council report, *The 1996 Report and Recommendations to Reduce Substance Abuse in Washington State*. This report addressed the two LBC recommendations that directed the Council to develop common substance abuse reduction goals, and to identify policy and funding priorities for strategies and programs.

In 1997 the Council reviewed their 1996 recommendations. Changes in the status of recommendations since their conception in 1996 are noted in *italics*. In addition, the Council has made minor updates in the wording and placement of some recommendations.

The Council's nine common goals outline priority areas to be addressed across prevention, treatment, and law and justice. Their related action strategies, policies, and study issues do not attempt to be comprehensive. Instead, they provide a common way to begin planning efforts to *reduce substance abuse in Washington State-*-the Council's mission.

The action strategies, policies, and study issues listed in this report are specific recommendations to the Governor for the 1997-99 Biennium in keeping with the Council's intent to present a balanced approach. Specific recommendations are presented and ranked separately for prevention, treatment, and law and justice. Rank numbers in parenthesis after each strategy indicate how this strategy is ranked within its specific category, i.e., prevention, treatment, or law and justice. It is the intent of the Council to update the action strategy, policy, and study issue recommendations during each biennial budget process.

Specific outcomes listed for prevention, treatment, and law and justice will, if accomplished, document meaningful progress toward each of the nine substance abuse reduction goals.

Detailed descriptions of the action strategies and policy and study issues are contained in the original full-length Council report. For a copy of the report, or if you have any questions, please call Carol Owens at (360) 586-0487.

### SUMMARY OF CHANGES TO RECOMMENDATIONS

The Council removed a reference to culturally appropriate treatment from the Treatment goals, instead wishing to emphasize that all actions resulting from these policy recommendations should be culturally appropriate.

In prevention outcomes, the Council changed "Increased percentage of adults who do not use..." to "Decreased usage of alcohol, tobacco, and other drugs."

In treatment outcomes, the Council changed the measure of "relapse rates" to "readmission rates."

An action strategy was added to the Law and Justice goals concerning reducing barriers to investigation and prosecution of illegal drug suppliers. This action strategy was previously included as an outcome measure.

The Law and Justice outcome "decreased production of methamphetamine" was changed to "slow the increase in production and trafficking of methamphetamine."

#### PREVENTION RECOMMENDATIONS

## ACTION STRATEGIES AND POLICY AND STUDY ISSUES BY GOAL

## Goal 1: Prevent and reduce the misuse and abuse of alcohol, tobacco, and other drugs.

### 1997-99 Action Strategies Recommended:

A. Increase capacity for schools and parents to work successfully with children in need of early intervention through enhancement of K-3 primary intervention services. (Rank: 1)

The Primary Intervention Program was eliminated. Administered by DSHS, the program served 68 elementary schools at a cost of \$950,000 per year.

- The Family Policy Council has chosen "early childhood supports" as one of three broad areas on which it will focus its policy work.
- B. Counter advertising promoting the use of alcohol, tobacco, and other drugs. Increase the general public's ability to evaluate pro-substance abuse messages, through dissemination of media literacy materials and training. (Rank: 2)

A Federal (FDA) rule that would have severely restricted the effectiveness and placement of tobacco ads was invalidated on statutory grounds by a Federal District Court. The FDA is appealing the decision. The proposed tobacco settlement, if approved by Congress and the President, would put in place the FDA's restrictions on tobacco ads and would further restrict advertising promotions.

### 1997-99 Policy and Study Issue:

A. Research the effects of increasing the tax on tobacco. Explore the potential for dedicating tobacco tax funds to prevention and control efforts.

A January 1997 Dept. of Health study found that a price increase on cigarettes from taxes reduces consumption more than it increases tax evasion, and in the long run (after six-months) the gap widens in favor of reduced smoking. The study says that tobacco taxes can be carefully crafted to reduce tobacco consumption and increase tax revenue. <sup>1</sup>

A March 1997 report developed for the Washington State Patrol by Washington State University found that organized crime was not involved in cigarette tax evasion, but that the recent increase in Oregon's cigarette tax may provide sufficient incentive for organized crime to become involved. The report estimates that 26% (\$88 million a year) of the potential cigarette tax revenue is lost to tax evasion schemes. The report recommends that the state:

- -Create a short-lived (four years) multi-agency task force to counter fuel, cigarette, and alcohol tax evasion;
- -Consider implementing infraction based civil penalties for consumer violations of cigarette and alcohol tax laws; and
- -Negotiate agreements with tribes concerning cigarette taxes.<sup>2</sup>

The Council wants to emphasize that tribal governments should be consulted and included in efforts to increase enforcement of tobacco tax collection laws.

## Goal 2: Focus on outcome-based prevention strategies to increase the effectiveness of prevention efforts.

### 1997-99 Action Strategy Recommended:

A. Enhance opportunities for parents to participate in parent education programs. (Rank: 3)

During the 1995-97 biennium DASA:

- Provided technical assistance to about 40 agencies that provided parent education.
- Sponsored 15 one-day trainings (750 participants) for recovering families.
- Disseminated information on curricula concerning high risk/recovering parents.

During the 97-99 biennium DASA is proposing in addition to the above to:

- Research effective parenting and evaluation programs.
- Increase coordination between DSHS and community programs focused on serving high risk/recovering parents.
- Create a statewide Parenting for Prevention Coordinating Council representing all relevant constituencies. The council would act as a centralized information source on ATOD prevention, disseminate information across disciplines, and provide leadership in advocating for programs that reduce risk and increase protective factors. Creation of this Council is still in the planning stages, and has yet to be approved by the DSHS administration.

The Northwest HIDTA is proposing to fund a community coalition support program (\$184,500 in FY 1998), to enhance collaboration between prevention, treatment, and law and justice system agencies.

### 1997-99 Policy and Study Issues:

A. Develop a statewide strategic plan for substance abuse prevention using information gathered for the Council's process.

Multiple state agencies collaborated with DASA as the Governor-designated lead agency, to prepare and submit an application for funding through the State Incentive Program process from the Center for Substance Abuse Prevention. If funded, the grant would fund development of a coordinated framework for statewide prevention efforts. As a corollary, local prevention providers would apply for funds through the State Incentive Program, but only if they could demonstrate a functioning consortium of local prevention providers was applying and only if the local consortia also were working on developing local prevention frameworks which coincided with the statewide framework.

B. Implement a process for state agencies to work with communities and each other to develop common outcome-based planning and evaluation methods.

Both DASA and CTED have ongoing discussions with prevention providers on this issue. DASA is implementing for the 1997-99 biennium a requirement that its county contractors develop prevention action statements which specify the measurable changes they think can be brought about as a result of prevention efforts. DASA has developed a training format for its county contractors to use in preparing their prevention program plans for the coming biennium. Additionally, DASA, CTED, and local prevention provider stakeholders, are in the process of developing a Prevention Management Information System for use in gathering and analyzing data provided by local prevention providers.

## Goal 3: Increase community ownership and responsibility for prevention of misuse of alcohol, tobacco, and other drugs.

#### 1997-99 Action Strategy Recommended:

A. Enhance effective enforcement of existing laws related to the use of tobacco and alcohol by minors. (Rank: 4)

The FDA has granted the Liquor Control Board funds to conduct 2,400 tobacco stings over an eight-month period.

The Liquor Control Board with assistance from the Traffic Safety Commission is piloting a program in Yakima County called "Cops in Shops," in which undercover law enforcement agents work inside and outside grocery and convenience stores to catch minors attempting to purchase alcohol or tobacco. Adults who illegally purchase for minors are also cited. If an ongoing evaluation shows the program to be successful, the Board intends to seek funding to expand the program statewide.

Responsibility for enforcing the tobacco tax was transferred to the Liquor Control Board. The LCB received an additional 20.5 FTEs to fulfill the new responsibility.

### 1997-99 Policy and Study Issues:

A. Review school suspension policies to identify effective strategies and programs for students in danger of suspension due to abuse of alcohol, tobacco, or other drugs.

No state-level change in the policies regarding school suspension.

B. Develop revisions to strengthen provisions of the clean air act and workplace laws to provide more smoke-free environments.

Smoking will no longer be allowed in federal buildings.

### Other Suggestions for Actions to Prevent Substance Abuse

A. Disseminate to community organizations information and training on using the risk and protective factor model for substance abuse reduction to develop effective, community-based prevention strategies.

Training continues for local providers using the technical assistance resources available to the state. To ensure an ongoing ability to provide the most up-to-date technical assistance possible, DASA and CTED each will have staff members trained as "Communities That Care" Process Facilitators. This training, conducted by Developmental Research and Programs, will give participants exposure to, and practice with, the most current risk factor/protective factor information. The other key partner in the training is the State of Oregon as they collaborate with Washington State DASA on the two-state demonstration project, Pacific Northwest Prevention Coalition.

DASA and CTED have implemented a risk and protective factors assessment tool that local prevention providers used to complete their applications for the 1997-99 biennium. This helped providers integrate the risk and protective factors framework into their services.

CTED is providing specific training on the protective factors as it was an area of weakness identified by a recent evaluation.

## PREVENTION OUTCOMES BY GOAL

The following outcomes, if accomplished, would document meaningful progress toward the three prevention goals.

# Goal 1: Prevent and reduce the misuse and abuse of alcohol, tobacco, and other drugs.

As demonstrated by--

A. Elimination of free tobacco samples.

Federal (FDA) rules eliminated tobacco samples on August 28, 1997.

B. Increased media responsibility for not glamorizing alcohol, tobacco, and other drugs.

The spirits industry has lifted their voluntary ban on radio and television advertising.

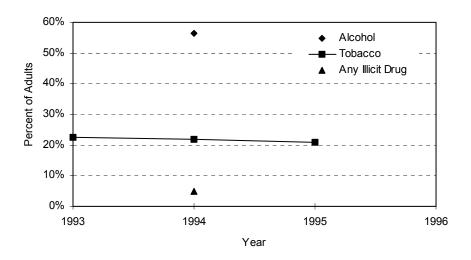
All of the Oscar nominated movies in 1996 portrayed smoking, up from 67% in 1995.<sup>3</sup>

C. Reduced advertising of alcohol and tobacco products.

Pierce County passed an ordinance banning outdoor tobacco ads within 1,000 feet of schools, and limiting outdoor tobacco ads to text only (tombstone). King County passed a ban on outdoor ads within 2,000 feet of schools.

D. Decreased usage of alcohol, tobacco, and other drugs by adults.

Adult Past Month Use of Alcohol, Tobacco, and Illicit Drugs<sup>4</sup>



E. Reduced per capita costs for health care related to use of alcohol, tobacco, and other drugs.

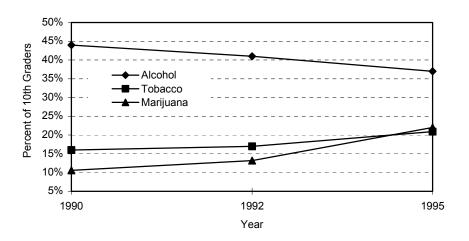
Adequate data not available.

F. Reduced per capita tax costs for chemical dependency.

Specific data not available for evaluation.

G. Increased percentage of youth who do not use alcohol, tobacco, and other drugs.

10th Grader Past Month Use of Alcohol, Tobacco, and Marijuana<sup>5, 6</sup>



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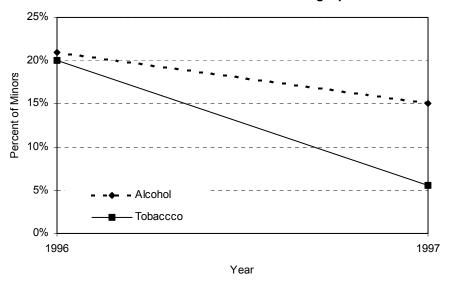
The primary source for this information was the school survey. DASA has a grant to do an adolescent household survey funded by the federal government.

H. Increased positive parenting among families at high risk for abuse of alcohol and other drugs.

Baseline information on parenting is being collected by DASA prevention contractors. Statewide data is not yet available.

I. Major decrease or elimination of sales of alcohol and tobacco products to minors.

Minors Sold Alcohol and Tobacco in Sting Operations 7



Statewide, compliance checks have reduced consumption.

Sting operations in Yakima County to target the sale of tobacco to minors by adults anecdotally appear to be effective. If a formal evaluation now being worked on shows them to be effective, the Liquor Control Board hopes to expand the stings statewide.

Although sales have been reduced via legal routes, kids are increasing use and binge use.

J. Reduced number of alcohol and drug-related birth defects.

Between 79 and 137 children are born with Fetal Alcohol Syndrome (FAS) each year in Washington State.<sup>8</sup>

## Goal 2: Focus on outcome-based prevention strategies to increase the effectiveness of prevention efforts.

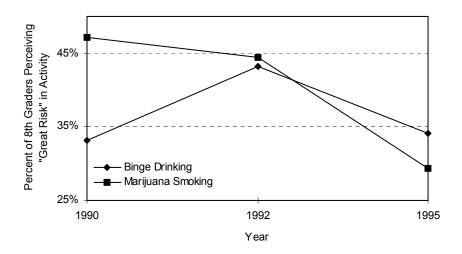
As demonstrated by--

A. Decreased misuse and abuse of alcohol, tobacco, and other drugs.

See 1D.

B. Increased awareness of harm caused by alcohol, tobacco, and other drugs.

## Perceived Risk of Binge Drinking and Marijuana Use Among 8th Graders<sup>9</sup>



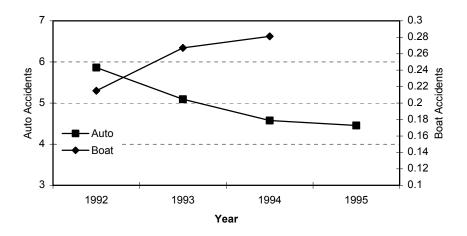
C. Increased research-based knowledge of what works to prevent the abuse of alcohol, tobacco, and other drugs.

Overall, this goal needs more attention, however:

- Monthly meetings between DASA staff and researchers from the Social Development Research Group at the University of Washington help disseminate research to practioners. Information provided during meetings is shared with other state level prevention providers at regular Washington Interagency Network meetings.
- Regular contractor trainings held by DASA, CTED, and SPI disseminate research-based knowledge to communities.

D. Reduced alcohol and other drug-related auto and boat accidents and fatalities.

Auto and Boat\* Accidents Involving Alcohol Per 100,000 People<sup>10, 11</sup>

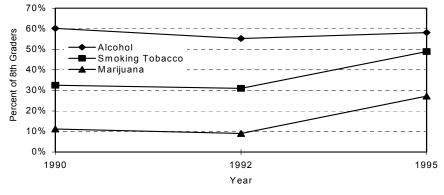


<sup>\*</sup>Alcohol involvement with boat accidents is thought to be significantly underreported.

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E. Increase in age of youths' first use of alcohol, tobacco, and other drugs.

Lifetime Prevalence of Alcohol, Smoking Tobacco, and Marijuana Use Among 8th Graders 12



1

F. Reduction in risk factors and an increase in the protective factors associated with alcohol, tobacco, and other drug use and abuse.

Baseline data is being collected to assess risk and protective factors as part of the Community Networks process.

Both CTED and DASA implemented a new risk and protective factors assessment tool for 1997-99 with their contractors. Evaluation work being done during 1997-99 by contractors will lead to the collection of

risk and protective factors outcome data from contractors on an ongoing basis.

## Goal 3: Increase community ownership and responsibility for prevention and misuse of alcohol, tobacco, and other drugs.

As demonstrated by--

A. Increased use of alternatives to suspension from school for abuse of alcohol, tobacco, and other drugs.

No change.

B. Increased number of, and participation in alcohol, tobacco, and other drug-free community and other social events.

Although a large number of communities have alcohol and drug-free events, the exact number of activities held each year is unknown

C. Increased number of smoke- and drug-free environments.

See B. above.

D. Increased linkages to provide pro-social, drug-free community support systems for youth.

The Northwest HIDTA is proposing to fund a community coalition support program (\$184,500 in FY 1998, to enhance collaboration between prevention, treatment, and law and justice system agencies).

The new joint DASA and CTED activity report is collecting information on community linkages.

E. Increased understanding among youth, families, and other community members that the misuse and abuse of alcohol, tobacco, and other drugs is not socially acceptable.

Information unavailable to track trend statewide.

### TREATMENT RECOMMENDATIONS

## ACTION STRATEGIES AND POLICY AND STUDY ISSUES BY GOAL

Goal 1: Increase access to and availability of chemical dependency treatment, as clinically necessary.

1997-99 Action Strategy Recommended:

- A. Increase treatment capacity and access by enhancing: (Rank: 1)
  - 1) Chemical dependency services to Native American communities;

Twenty-seven tribes participate in the DASA Government-to-Government Contracting Option, in which federally recognized tribes contract with directly with DASA as opposed to receiving services through the County.

2) The ADATSA (Alcohol and Drug Addiction Treatment and Support Act) Program to reduce the waiting list;

DASA received \$5.5 million to fund treatment and vocation services for ADATSA and SSI/SSDI clients. (Repeat from 3A).

A task force has recommended that King County start a pilot juvenile drug court program.

3) Treatment in jails and prisons;

Thurston and Pierce counties have treatment in jails programs partially funded by CTED.

Yakima county recently started a treatment in jails program.

The Department of Corrections, with assistance from a grant from CTED, has started a substance abuse treatment program for women at the Pine Lodge correctional facility.

4) Treatment for youth; and

DASA is adding 5 new juvenile beds, for a total of 157.

Juvenile Rehabilitation received \$1.2 million for the chemical dependency disposition alternative program (treatment).

5) Treatment for pregnant women.

The University of Washington received \$1.52 million for the Birth-to-Three Program, which assists pregnant and parenting women with substance abuse problems. The program also helps their children. (Repeat from 2A)

DASA expanded treatment capacity for women and children in September when a new treatment facility was opened in Tacoma, which has the capacity to serve 16 women and children.

#### 1997-99 Policy and Study Issue:

A. Study involuntary commitment options to develop adequate services available statewide.

A report from the Joint Legislative Audit and Review Committee (JLARC) on Chromic Public Inebriates found that the broad-based continuum of care model used in Portland, Oregon has anecdotal evidence supporting its effectiveness. However, no formal evaluation has been done.

### Goal 2: Reduce the negative effects of alcohol, tobacco, and other drugs.

#### 1997-99 Action Strategy Recommendations:

A. Continue Fetal Alcohol Syndrome (FAS) advocacy for high-risk, substance abusing mothers, including prevention/intervention programs in Native American communities. (Rank: 2)

The Washington State FAS Diagnostic and Prevention Network, provides diagnostic, treatment, and prevention services throughout the state via its six clinics. The network, started in 1995, is recognized as a national model of FAS diagnosis and prevention.

The University of Washington received \$1.52 million for the Birth-to-Three Program, which assists pregnant and parenting women with substance abuse problems. The program also helps their children. (Repeat from 1A5)

B. Expand alternatives to hospital-based detoxification services. (Rank: 4)

There is no statewide program in Washington that is primarily focused on chronic public inebriates.

Spokane and King counties have started "sobering units," which provide no more than 12-hours of care for persons who need to "sleep off" the effects of alcohol. These units were started to help meet the huge demand for detox services.

### Goal 3: Address the basic needs of people in chemical dependency treatment.

#### 1997-99 Action Strategy Recommendation:

A. Enhance vocational and educational opportunities for people in treatment and aftercare. (Rank: 3)

DASA received \$4 million for the 1997-99 biennium for treatment of TANF clients.

DASA received \$5.5 million this biennium to fund treatment and vocation services for ADATSA and SSI/SSDI clients. (Repeat from 1A2)

Pierce County is planning to offer vocational services as part of their treatment in jail program.

## TREATMENT OUTCOMES BY GOAL

The following outcomes, if accomplished, would document meaningful progress had been made toward the three treatment goals.

## Goal 1: Increase access to, and availability of chemical dependency treatment, as clinically necessary.

As demonstrated by--

A. Increase in total number of people receiving chemical dependency treatment relative to the number of people in need of treatment.

Only 21% of adults in Washington who need substance abuse treatment and who were poor enough to qualify for publicly-funded treatment received treatment in 1996.<sup>13</sup>

B. Increased percentage of underserved and special population members receiving chemical dependency treatment relative to the number in

need of treatment (e.g., pregnant women with alcohol and other drug problems.)

Services were expanded for pregnant and parenting women and Native Americans (see goal 2).

C. Reduction in time people assessed in need of treatment remain on a waiting list before being admitted to treatment.

No change from 1996.

D. Reduction in the readmission rates for persons completing treatment.

No new data on readmissions.

## Goal 2: Reduce the negative effects of alcohol, tobacco, and other drugs.

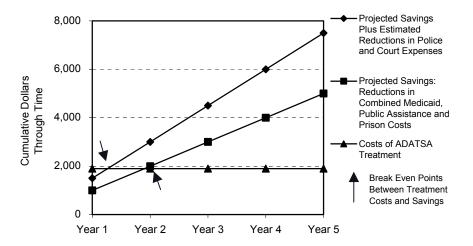
As demonstrated by--

A. Reduction in the incidence of domestic violence involving persons abusing alcohol and other drugs.

Although there is a correlation between substance abuse and domestic violence, there is no data clearly proving a cause and effect relationship. <sup>14</sup>

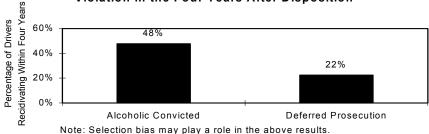
B. Reduced criminal arrests following chemical dependency treatment.

## ADATSA Substance Abuse Treatment Cost Savings<sup>15</sup>



C. Reduced number of drunk and drugged driving offenses among persons during and after chemical dependency treatment.

Deferred Prosecution Cuts in Half the Number of Alcoholic Drivers Who Commit an Alcohol-Related Violation in the Four Years After Disposition<sup>16</sup>



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D. Reduced need for alcohol and other drug-related emergency room visits, and reduced number and length of hospital stays.

See outcome B.

### Goal 3: Address the basic needs of people in chemical dependency treatment.

As demonstrated by--

A. Increased employment and self-sufficiency among people in treatment and aftercare.

See goal 2, outcome B.

B. Increased number of people living in safe and appropriate housing during and after chemical dependency treatment.

No information available to track outcome.

C. Increased parenting and family training and support provided to people during and after chemical dependency treatment.

No information available to track changes.

D. Increased number of people completing treatment and vocational programs.

No information available to track changes.

E. Increased community knowledge of and responsibility for providing chemical dependency treatment.



### LAW AND JUSTICE RECOMMENDATIONS

## ACTION STRATEGIES AND POLICY AND STUDY ISSUES BY GOAL

### **Goal 1:** Increase public safety.

#### 1997-99 Action Strategy Recommendation:

A. Enhance and sustain a methamphetamine team to enforce methamphetamine laws, and educate persons affected by methamphetamine production and sales. (Rank: 2)

No additional funding provided for meth team.

B. Continue support for interagency drug task force efforts.

State Byrne Grant funding for interagency drug task forces increased from \$4,836,500 in FY 1997 to \$4,858,325 in FY 1998.

The Byrne committee has voted to increase funding to task forces in FY 1999 using Federal Byrne Grant carryover funds.

C. Reduced barriers to investigation and prosecution of illegal drug suppliers.

As part of the HIDTA, a new intelligence center is being developed (see Goal 2, B).

## Goal 2: Increase the effectiveness of law and justice efforts to reduce alcohol and other drug abuse-related crimes.

#### 1997-99 Action Strategy Recommendations:

A. Enhance and expand availability of drug courts in Washington State. (Rank: 1)

\$600,000 of Federal HIDTA (High Intensity Drug Trafficking Area) funds are expected to go to existing drug courts in King and Pierce counties, and to new drug courts in Thurston and Skagit counties.

A King county task force has recommended the county create a pilot juvenile drug court.

Clallam County is in the process of setting up a juvenile drug court.

B. Improve and expand the justice information and criminal intelligence reporting systems. (Rank: 3)

Using about \$1.8 million of HIDTA grant funds, an Investigative Support Unit is being set-up to centrally collect and organize drug-related criminal intelligence information for law enforcement agencies in the HIDTA.

### 1997-99 Policy and Study Issues:

A. Enact appropriate pen registration and one-party consent laws.

Legislation was introduced in the 1997 legislative session but did not pass.

B. Develop effective sentencing alternatives to decrease the use of incarceration (e.g., day reporting and electronic detention.)

A chemical dependency disposition alternative was enacted as part of the juvenile justice legislation that passed in the 1997 session.

The WASPC Correctional Options Program (electronic monitoring and day reporting) served 36 local governments and 24 state facilities in 1996, providing a sentencing alternative to 1,872 offenders. As of May 1997 they were serving an additional 15 local governments and two state facilities (repeated in outcome 2D).

## Goal 3: Foster citizen involvement and support for effective law and justice efforts, including community-oriented policing.

#### 1997-99 Action Strategy Recommendations:

A. Develop ongoing citizen and local law enforcement training for community policing efforts. (Rank: 4)

The Washington Association of Sheriff's and Police Chiefs in cooperation with the Washington State University Institute for Community Oriented Policing have provided crime prevention training to law enforcement agencies throughout the state.

#### 1997-99 Policy and Study Issue:

A. Support cross-jurisdictional cooperation between local, state, Indian tribe, and federal law and justice systems.

The county-based and federal drug task forces in Pierce County are planning to share the same facilities as part of an effort to increase cooperation.

## **LAW AND JUSTICE OUTCOMES BY GOAL**

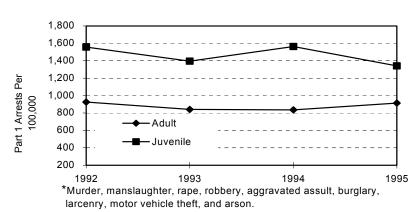
The following outcomes, if accomplished, would document meaningful progress toward the law and justice substance abuse reduction goals.

## Goal 1: Increase public safety.

B.

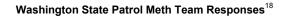
As demonstrated by--

A. Reduced alcohol and other drug-related crimes, and serious (Part I) crimes.

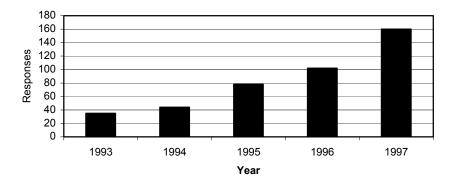


Part 1\* Crime Arrests Per 100,000 Population 17

7



Slow the increase in production and trafficking of methamphetamine.



Although not directly related to the action strategy tied to this outcome, a law did pass regarding methamphetamines. SSB 5191 would have

made the following crimes a "strike" under the "three strikes you're out" law:

- 1) Possession of ephedrine or pseudoephdrine with intent to manufacture methamphetamine.
- 2) Possessing methamphetamine with intent to sell or selling methamphetamine.

Governor Locke vetoed this expansion of the "three strikes" law. Governor Locke argues that expanding the "three strikes" law to non-violent crime is inappropriate, and that locking-up addicts that sell small quantities of drugs to support their habit "would divert more and more of the state's scarce resources from prevention efforts that provide a more immediate and effective response to the problem."

Governor Locke approved portions of the bill that dedicated the first \$3,000 of fine money collected to the law enforcement agency responsible for the meth lab clean-up.

C. Reduced environmental contamination danger to the public from illegal methamphetamine labs.

Although the number of methamphetamine labs continues to grow, law enforcement, public health, and Ecology officials continue to coordinate their efforts to clean-up the resulting health and environmental hazards.

D. Reduced barriers to investigation and prosecution of key drug suppliers.

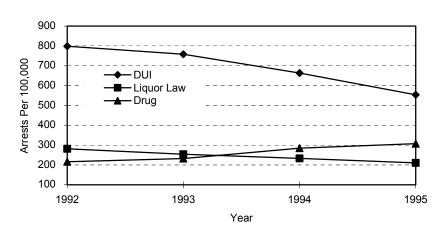
Changes are needed in the pen registration and one-party consent laws, which are seen as a barrier to investigation and prosecution of drug suppliers.

## Goal 2: Increase the effectiveness of law and justice efforts to reduce alcohol and other drug abuse-related crimes for juveniles and adults

As demonstrated by--

A. Reduced alcohol and other drug-related crimes.

Alcohol and Drug Crime Arrests Per 100,000 Population (Adult and Juvenile)<sup>19</sup>



19

B. More efficient, effective, and faster response by the law and justice systems.

No data available to track efficiency.

C. Decreased time between juvenile arrest and adjudication.

Information not available using current data systems.

D. Increased utilization of sentencing alternatives that do not result in incarceration.

The WASPC Correctional Options Program (electronic monitoring and day reporting) served 36 local governments and 24 state facilities in 1996, providing a sentencing alternative to 1,872 offenders. As of May 1997, they are serving an additional 15 local governments and two state facilities. (Repeat from Policy and Study Issue 2B)

E. Increased coordination across jurisdictions for joint arrest and prosecution cooperation (city, county, tribes, state, and federal).

See goal 3, policy and study issue A.

F. Increase in number of persons clinically assessed at the time of incarceration for alcohol, tobacco, and other drug treatment.

The percentage and type of chemical dependency assessment varies between correction institutions. For example:

- ◆ State Department of Corrections —In 1996, 60% of incoming offenders were screened for substance abuse.
- ◆ State Department of Juvenile Rehabilitation -- Screens 100% of juveniles entering their care for substance abuse problems.
- ♦ Thurston County Offenders are only assessed if ordered by a judge.
- ♦ *King County Most offenders are given a basic screening.*
- G. Increase in number of counties with reasonable access to juvenile detention facilities.

Tribes are also interested in gaining better access to juvenile detention facilities.

H. Increased level of technical assistance and education to retailers to reduce sales to minors.

The Liquor Control Board has developed a training video, "Responsible Liquor and Tobacco Sales," which is available for free to retailers, and is required viewing by liquor store employees.

## Goal 3: Foster citizen involvement and support for effective law and justice efforts, including community-oriented policing.

As demonstrated by--

A. Increased public perception of community safety.

No statewide information available on public perceptions.

B. Increase in favorable attitudes and willingness of the public to cooperate with law enforcement in efforts to combat alcohol and other drug abuse.

Although no statewide studies have been done, individual surveys done in communities throughout the state show that people are satisfied with the police services provided to them. In Spokane, where a survey has been repeated several times since 1992, people are becoming increasingly satisfied with the community-oriented police services they receive.<sup>20</sup>

<sup>&</sup>lt;sup>1</sup> Washington State Department of Health, Tobacco Prevention Program, Cigarette Consumption in Washington State, December 1996.

<sup>&</sup>lt;sup>2</sup> Russell, Gregory D., Washington State University, Division of Governmental Studies and Services, *Untaxed Goods in Commerce: Tax Evasion in the State of Washington*, March 1997.

<sup>&</sup>lt;sup>3</sup> American Lung Association, Thumbs Up! Thumbs Down! Project, 1997.

<sup>&</sup>lt;sup>4</sup> Washington State Department of Social and Health Services, Division of Alcohol and Substance Abuse, 1997 Tobacco, Alcohol, and Other Drug Abuse Trends in Washington State, pages 7,79.

<sup>&</sup>lt;sup>5</sup> Washington State Department of Social and Health Services, Division of Alcohol and Substance Abuse, 1997 Tobacco, Alcohol, and Other Drug Abuse Trends in Washington State, pages 59, 61.

<sup>&</sup>lt;sup>6</sup> Superintendent of Public Instruction, *Washington State Survey of Adolescent Health Behaviors*, February 1996, page 66.

<sup>&</sup>lt;sup>7</sup> Liquor Control Board.

<sup>&</sup>lt;sup>8</sup> Washington State Department of Social and Health Services, Division of Alcohol and Substance Abuse, 1997 Tobacco, Alcohol, and Other Drug Abuse Trends in Washington State, page 93.

<sup>&</sup>lt;sup>9</sup> Superintendent of Public Instruction, *Washington State Survey of Adolescent Health Behaviors*, February 1996, pages 66-67.

<sup>&</sup>lt;sup>10</sup> Washington State Traffic Safety Commission, *Traffic Collisions in Washington State, August 1996, page 21.* 

<sup>&</sup>lt;sup>11</sup> U.S.Department of Transportation, United States Coast Guard, *Boating Statistics 1994*, September 1995, page 31.

<sup>&</sup>lt;sup>12</sup> Superintendent of Public Instruction, *Washington State Survey of Adolescent Health Behaviors*, February 1996, page 48.

<sup>&</sup>lt;sup>13</sup> Washington State Department of Social and Health Services, Division of Alcohol and Substance Abuse, 1997 Tobacco, Alcohol, and Other Drug Abuse Trends in Washington State, page 40.

<sup>&</sup>lt;sup>14</sup> Washington State Office of Administrator for the Courts, *Domestic Violence Manual for Judges*, 1993.

<sup>&</sup>lt;sup>15</sup> Luchansky, Bill; Longhi, Dario, Washington State Department of Social and Health Services, Office of Research and Data Analysis.

<sup>&</sup>lt;sup>16</sup> Washington State Department of Social and Health Services, Division of Alcohol and Substance Abuse, 1997 Tobacco, Alcohol, and Other Drug Abuse Trends in Washington State, page 211.

<sup>&</sup>lt;sup>17</sup> Washington Association of Sheriff's and Police Chiefs, *Crime in Washington State*, 1992, 1993, 1994, 1995.

<sup>&</sup>lt;sup>18</sup> Washington State Patrol, Investigative Support Unit.

<sup>&</sup>lt;sup>19</sup> Washington Association of Sheriff's and Police Chiefs, *Crime in Washington State*, 1992, 1993, 1994, 1995.

<sup>&</sup>lt;sup>20</sup> Washington State Institute for Community Oriented Policing, Washington State University, 1997.